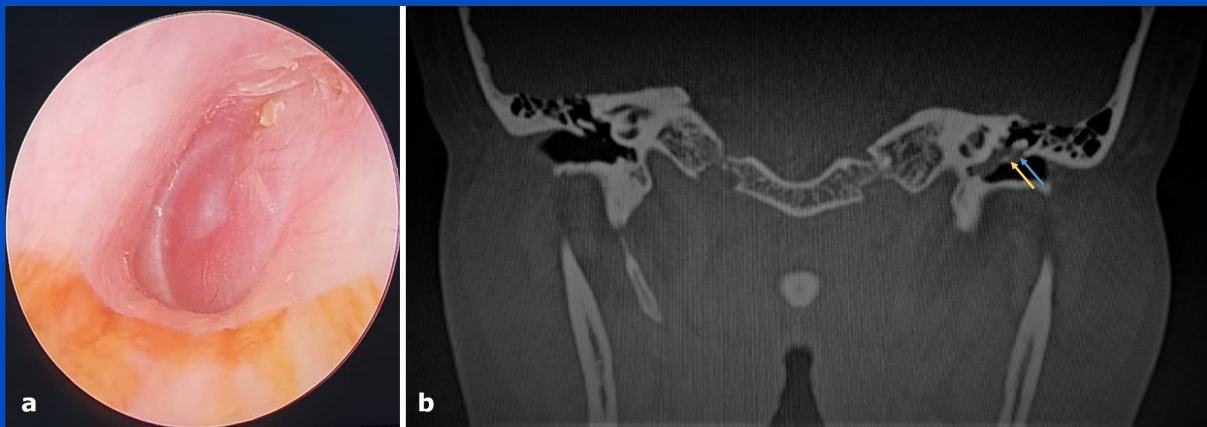


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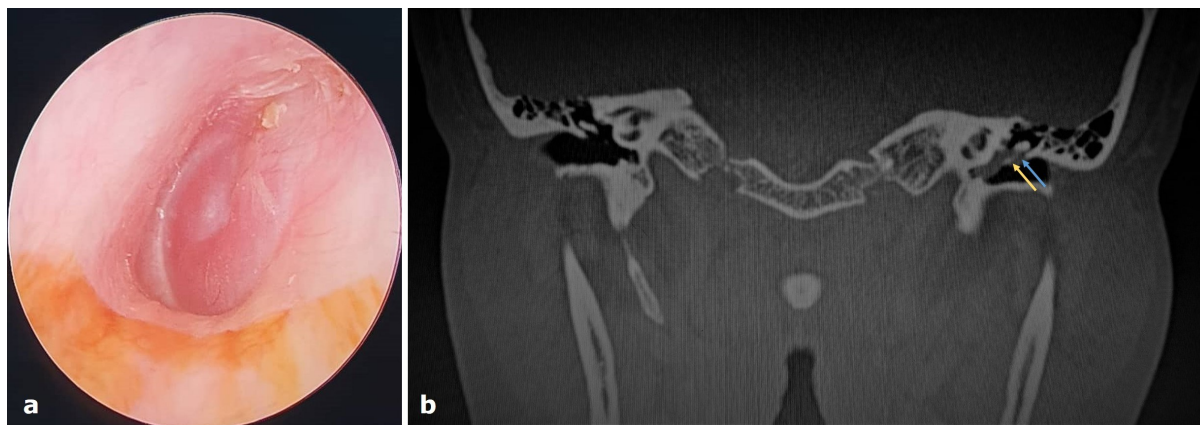


Figure 1

A previously healthy 50-year-old female presented with one-month history of left-sided aural fullness with pulsatile tinnitus. There was no obvious hearing loss, otalgia, otorrhea or otorrhagia. Recent trauma or upper respiratory tract infection was also absent. Additionally, no recurrent nasal symptom or neck swelling were mentioned. Patient denies any constitutional symptoms. Upon examination, patient appears comfortable. External ear examination was normal. Otoscopic examination revealed bulging left tympanic membrane with no discharge (Figure 1a); whereas right tympanic membrane was normal. Nasoendoscopic examination was unremarkable. Neck examination was unremarkable. Cranial nerve examination was intact. Pure tone audiometry revealed left mild conductive hearing loss and normal hearing. High-resolution computed tomography (HRCT) revealed soft tissue mass within the middle ear with evidence of erosion of ossicles (Figure 1b).

What is the diagnosis?

Answer: refer to page 114

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Jeyasakthy Saniasiaya is the corresponding author and is responsible in planning, conducting, reporting the work.

Kuganathan Ramasamy is responsible for literature review

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